2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000017739

Entity Name: LONG ISLAND HOLDINGS, INC.

MINUTOLO, CHARLES

2320 NE 48TH STREET

LIGHTHOUSE POINT, FL 33064

Name:

Address: City-St-Zip: FILED Feb 07, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6248 NW 32ND TERRACE BOCA RATON, FL 33496 **Current Mailing Address: New Mailing Address:** 6248 NW 32ND TERRACE BOCA RATON, FL 33496 FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MINUTOLO, CHARLES Y 2320 NE 48TH STREET LIGHTHOUSE POINT, FL 33064 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition MACDONALD, RAYMOND W Name: Name: 11312 NE 11TH PLACE Address: Address: City-St-Zip: MIAMI, FL 33161 City-St-Zip: Title: Title: () Delete (X) Change () Addition MINUTOLO, CHARLES Name: MACDONALD, MERRILL W Name: 126 DOUGLAS DRIVE 2320 NE 48TH STREET Address: Address: JACKSON, NJ 08527 LIGHTHOUSE POINT, FL 33064 City-St-Zip: City-St-Zip: Title: Title: SD (X) Delete () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: RAYMOND W. MACDONALD PD 02/07/2007